BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

70231

CLAIMS AS FILED - PART (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			15					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS / minus				us 20=	*.	0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS / minus 3				nus 3 =	*	D		X40=		OR	X80=	n
MULTIPLE DEPENDENT CLAIM PRESENT								+135≔				
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	'	+135≅ TOTAL	 	OR	+270=	110.1
CLAIMS AS AMENDED - P.					T II			IOIAL		OR	TOTAL OTHER	<i>Τ</i> ΗΔΝ
	** **	(Column 1)		(Colum		(Column 3) SM		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 16	Minus	Z	0	=	X\$ 9=		OR	X\$18=		
	Independent	* Z	Minus	***	S CLAIM	=		X40=		OR	X80=	
	rinoi rheoe	INTATION OF IM	JETIPLE DEF	ENDEN	CLAIM		ľ	+135=	(OR	+270=	
							L	TOTAL [*] ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	_ ′	ADDI1.1 EE 1			ADDI1.1 CE1	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CLAINA	=		X40=		OR	X80=	
		NIATION OF MA	DETIPLE DEF	CINDEINI	CLAIM	<u>L</u>	J	+135=		OR	+270=	
							Α	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	er ye ar er ar anna an any any	(Column 1)	**************************************	(Colur		(Column 3)						
AMENDMENT C	, , , , , , , , , , , , , , , , , , , ,	CLAIMS REMAINING AFTER AMENDMENT	, , , , , , , , , , , , , , , , , , ,	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		!	+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ADDIT. FEE	
-	n are imignest Nu The "Highest Num	mber Previously Pa ber Previously Pai	d For" (Total o	o opace i Independi	s iess tha ent) is the	n 3, enter "3." highest numbe		NDDIT. FEE	ropriate box			